SEC 1972 (6-02) Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden hours per response... 1



1248036

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							

1 3 1000				
Name of Offering ([] check if this is	an amendment and name has changed	d, and indicate	e change.)	
Filing Under (Check box(es) that appropriate Type of Filing: [X] New Filing [[x]Rule	506 [] Section 4(6)	[]ULOE
Enter the information requested at	bout the issuer AVALARA, I	INC.		
Name of Issuer ([] check if this is	an amendment and name has changed,	and indicate	change.)	
Address of Executive Offices (900 Winslow Way East, Bainbridge	Number and Street, City, State, Zip Coge Island, WA 98110	ode)	Telephone Number (Includin (206) 780-4848	g Area Code)
Address of Principal Business Opera (if different from Executive Offices)	ations (Number and Street, City, State	e, Zip Code)	Telephone Number (Includi	ing Area Code)
Brief Description of Business econ	nmerce			
Type of Business Organization				PROCESSED
[X] corporation	[] limited partnership, already	formed	[] other (please spe	ecify):
[] business trust	[] limited partnership, to be for	rmed		DEC 2 8 2005
		Month Ye	ear	THOMSON FINANCIAL
Actual or Estimated Date of Incorpo	oration or Organization:	0][8] [9]9	[x] Actual [] Es	stimated
Jurisdiction of Incorporation or Organical	anization: (Enter two-letter U.S. Posta	l Service abbi	eviation for State:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

CN for Canada; FN for other foreign jurisdiction) [W][A]

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

hns

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) : McFarlane, Scott
Business or Residence Address (Number and Street, City, State, Zip Code): 900 Winslow Way East, Bainbridge Island, WA 98110
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual): Vogt, Jared
Business or Residence Address (Number and Street, City, State, Zip Code): 900 Winslow Way East, Bainbridge Island, WA 98110
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Rawlings, Rory
Business or Residence Address (Number and Street, City, State, Zip Code) 900 Winslow Way East, Bainbridge Island, WA 98110
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Carleton, John
Business or Residence Address (Number and Street, City, State, Zip Code) 900 Winslow Way East, Bainbridge Island, WA 98110
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Steigerwald, Scott
Business or Residence Address (Number and Street, City, State, Zip Code) 900 Winslow Way East, Bainbridge Island, WA 98110
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Market to be to design of					В.	INFORM	IATION A	BOUT O	FFERING				
1. Has t	he issuer	sold, or do	es the iss	uer intend	to sell, to	non-accre	dited inves	stors in this	offering?.			Yes No	
		•	٨	inswer als	o in Appe	ndix, Colu	mn 2, if fi	ling under	ULOE.				
2. What	is the mi	nimum inv	vestment t	hat will be	e accepted	from any	individual	?				\$50,000.00	
3. Does	the offeri	ng permit	joint own	ership of	a single un	nit?						Yes No	
commis If a persor state	ssion or sisson to be l so, list the i	milar remo listed is an name of th	uneration associate e broker o	for solicita d person o or dealer.	ation of pu or agent of	rchasers in a broker of an five (5)	n connection dealer re persons to	on with sal egistered w be listed a	, directly o es of secur ith the SEC re associat	ities in the Cand/or w	offering.	. , [9	
Full Na	me (Last	name first	, if individ	lual)									
Busines	s or Resid	dence Add	ress (Nun	ber and S	treet, City	, State, Zij	p Code)						
Name o	of Associa	ted Broke	r or Deale	r									
					Intends to		ırchasers			[]	All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first	, if individ	lual)									
Busine	ss or Resid	dence Add	lress (Nun	nber and S	Street, City	, State, Zi	p Code)						
Name o	of Associa	ted Broke	r or Deale	r									
					Intends to		urchasers			[]	All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first	, if indivi	dual)									
Busine	ss or Resi	dence Add	lress (Nun	nber and S	Street, City	, State, Zi	p Code)						<u> </u>
Name of	of Associa	ited Broke	r or Deale	r									
					Intends to		urchasers	***************************************		[]	All States		escularion de la compania de la comp
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
เหม	ISCI	נמסז	[TN]	[TY]	ff iTl	IVTI	[VA]	[WA]	rwvi	rwn	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$6,600,000.00	\$_5,414,098.00
[] Common [X] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify).	\$	\$
Total	\$ 6,600,000.00	\$ 5,414,098.00
Answer also in Appendix, Column 3, if filing under ULOE.	-	
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
,	Number	Aggregate Dollar Amount
	Investors	of Purchases
Accredited Investors	17	\$ <u>5,414,098.00</u>
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		-
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of Security	Dollar Amount
Type of offering	Type of Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		. \$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[1 \$	
Printing and Engraving Costs		
Legal Fees		40,000.00
Accounting Fees		40,000.00
Engineering Fees		
Sales Commissions (specify finders' fees separately)		
Other Expenses (identify)	L J	40,000,00
Total	[x] \$_	40,000.00

b.	Enter the difference between the aggregate offering price total expenses furnished in response to Part C – Question proceeds to the issuer"	\$ <u>5,374,098.00</u>			
	·				
for e	dicate below the amount of the adjusted gross proceeds to the ach of the purposes shown. If the amount for any purpose is keen the box to the left of the estimate. The total of the payment proceeds to the issuer set forth in response to Part C - Que:	not known, furnish an estimate and its listed must equal the adjusted			
, -			Affiliates	Payments To Others	·
	Salaries and fees			[]\$	
	Purchase of real estate		[]\$	[]\$	
	Purchase, rental or leasing and installation of machinery and equipment		[]\$	[]\$	
	Construction or leasing of plant buildings and facilities	•	[]\$	[]\$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		[]\$	[]\$	
	Repayment of indebtedness		[]\$	[x]\$	
	Working capital			[x]\$ <u>5,374,098.00</u>	
	Other (specify):			[]\$	
			[]2	[]\$	
	Column Totals		[]\$0-	[x] \$ <u>5,374,098.00</u>	
	Total Payments Listed (column totals added)		[x]	\$ <u>5,374,098.00</u>	
The	D. issuer has duly caused this notice to be signed by the unders	FEDERAL SIGNATURE	s notice is file	d under Rule 505, the fe	ollowing
sign	ature constitutes an undertaking by the issuer to furnish to the mation furnished by the issuer to any non-accredited invest	ne U.S. Securities and Exchange Cor	mmission, upo		
Issu	er (Print or Type)	Signature	Dat	te	
Ava	ılara, Inc.	per las	Dec	cember 8, 2005	
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)	······································		
Ioro	1 Voca	CEO			
Jare	d Vogt				
	4	ATTENTION			
	Intentional misstatements or omissions of		iolations. (Se	e 18 U.S.C. 1001.)	
	interitorial informetics of outstones of	a race constitute react at experiment	Totalional (De		